

Minutes  
Substance Abuse and Child Safety Task Force  
September 2, 2015 – 1:00 P.M.  
Indiana Statehouse – Room 431

**Members Present:**

Sirrilla Blackmon, FSSA - Division of Mental Health and Addiction; C.J. Davis, Four County Counseling Center; Mindi Goodpaster, Marion County Commission on Youth; Cathleen Graham, Indiana Association of Resources & Child Advocacy (IARCA); Senator Randy Head, Chair; Lt. Kevin Hobson, Indiana State Police; Suzanne O'Malley, Indiana Prosecuting Attorneys Council; Carey Haley Wong, Child Advocates; Parri Black, Youth First, Inc.; Cathy J. Boggs, Community Health Network; Marc D. Kniola, Indiana Department of Correction, Division of Youth Services

**Members Absent:** Jessica Skiba, Indiana State Department of Health; Lisa Rich, Indiana Department of Child Services; Suzanne F. Clifford, Community Health Network;

**Staff Members Present:** Mike Brown, Indiana State Senate

**Call to Order:** 1:01 P.M.

**Approval of May and July Minutes:**

Both May and July minutes approved by voice vote.

Senator Head provided an update:

- In light of the Governor's creation of the Task Force on Drug Enforcement, Treatment, and Prevention, Senator Head will be sending the Governor a letter informing him about this task force and the progress it has made. The letter will request a meeting in an effort to decrease a duplication of efforts. The letter will be sent on September 3, 2015.
- Senator Head is meeting with the Commission twice a year to give them updates.
- One important task is to get information on trauma informed care – some information is in the handouts today.

**Presentations:**

**Julie Smart, Program Coordinator for School Social Work – Indiana Department of Education**

Julie's overall goal is to inform the task force about what are schools currently doing to educate youth about drugs and addiction, what barriers exist, and how can Indiana improve in this area.

What are schools currently doing?

- IDOE provides substance abuse training and technical assistance to all schools. IDOE gets calls daily from schools or parents about many things including substance abuse.
- School Safety Specialist training. This year IDOE will provide training on opioid and heroin education and prevention. Lesson plans and classroom materials will be designed to provide students with an opportunity through guided and practical exercises.
- There are also school safety regional trainings. There is one in November 2015 and April 2016. These trainings will among other things discuss drug trends, identifying e-devices, drug clothing and identifiers, and designer drug use.
- At the individual school level, schools have standards. These standards include both direct and indirect reference to substance abuse, understanding the emotional and physical dangers, behaviors, consequences, and refusal skills.
- Schools have incorporated classroom guidance lessons; however, these standards are currently under review and have not been updated since 2003:
- <http://www.doe.in.gov/sites/default/files/standards/guidance/09-01-2003-Guidance.pdf>
- Indiana's Health and Wellness Standards include education regarding substance abuse:
- <http://www.doe.in.gov/standards/health-and-wellness>

What barriers exist?

- Acknowledgement – must understand and acknowledge that drugs exist in every school both rural and urban.
- Funding – schools could always use more funding for substance abuse education
- Systems of Care – could use a boost
- Resources – could improve
- Resource Mapping – some places around the state mapping is going well and others not so much.

Trauma informed care must be acknowledged before academics. We must get their social and home health better before they will do better in school.

Cathy Boggs asked why DOE standards have not been updated since 2003. DOE standards are being revamped. Is there a reason why the standards have not been updated for 12 years? Julie did not know the answer, but stated that suicide prevention must start in kindergarten. The multi disciplinary approach is key. Teachers must have a suicide prevention course before they are hired and teachers must take refresher courses. Kathy, the Director of Student Services is the best contact on this issue.

Cathy Graham asked a question. Julie stated that the people who attend meetings know what the issues are, but some information is not getting relayed to the local schools.

Mindi Goodpaster made a statement. There is a lot that teachers need to be trained on (bullying, drugs, suicide, etc.) there needs to be more of a focus on the social or emotional aspect. How do we bring things together in training staff in social emotional and how kids learn in the school setting. Julie Smart stated that higher education is now teaching a more holistic approach, whereas this was not the case a few years ago.

**Carlos Gutierrez, Senior Director of State Government Affairs – Consumer Healthcare Products Association**

CHPA is an over the counter medication industry. Over the counter medication often gets overlooked in the drug conversation. They are affordable and entrusted.

PSE has been OTC for over 40 years. It's not addictive. Federal government has placed restrictions on PSE purchases. NPLeX has blocked many boxes from being sold. Alabama has dropped 82% in meth busts since they enacted a law making it illegal for meth makers to buy PSE. Wants to see PSE blocking, not Rx only.

Would oppose if law required consultation by a pharmacist (opposes Arkansas law).

Zephrex-D and Nexafed are not members of CHPA.

**Kent Brown, CEO, Fairbanks Hospital and Hope Academy; Rachelle Gardner, Director of Adolescent Services/Chief Operating Officer for Hope Academy; and Dr. Sigurd Zielke, Fairbanks/Hope Academy, Clinical Specialist**

Fairbanks is a nonprofit organization focused on recovery from alcohol and other drug problems, serving as a resource to improve the well-being of individuals, families and communities by offering hope and support through its programs and services. Fairbanks is one of the oldest independent alcohol and drug treatment centers in America.

Its adolescent programs consist of: detox and rehabilitation, partial hospitalization, outpatients services, recovery management services, the Prime Life Educational Program, tobacco cessation, and the Hope Academy Recovery High School.

The Recovery Center focuses on 12-step meetings, recovery coaching, and recovery management.

The Hope Academy Recover High School –

- Mission: To provide a safe, sober, and challenging school experience for students who share a commitment to educational achievement and personal growth.
- Youth are at a significant risk or relapse when they return to their home school. One study found that virtually all adolescents returning from treatment to their old school reported being offered drugs on their first day back in school (Spear & Skala, 1995).
- Hope Academy puts a lot of focus on recovery. Addiction treatment is about abstinence plus an improved quality of life. Treatment is important, but learning how to be successful at life and school is key components.
- Hope is a tuition-free charter school and is the only recovery high school in Indiana. It has served over 400 students and graduated over 110 students.
- Recovery High Schools are generally voluntary, credits are offered toward a diploma, part of care but not primary treatment, and are typically small so staff can identify behaviors (class size is around 5-12).

- Challenges of Hope: maintaining a strong and steady enrollment, community awareness, earlier identification, payer education (insurance views youth and adults through the same criteria – seeing life threat as immediate rather than as a change of course), perception that marijuana is benign, and stigma (addiction = failure).
- Focus on Dual Recovery: recovery facilitates learning and learning facilitates recovery.
- Lilly Foundation Research Award: Examined data of students who attended Hope for years 2011-2014 (fall term). Study found that 88 percent of those academically successful are also successful in recovery. Also, 88 percent of those successful in recovery are also successful in academics.

Carey Haley Wong asked at what age can someone start at Hope. Hope Academy starts at 9<sup>th</sup> grade. Knowing what a student's home life is important in helping to support the student.

Mindi Goodpaster asked if Hope took students from around the state. Yes they do, but most of their students come from or near the Indianapolis area. Additionally, Hope has limited bus transportation.

Suzanne O'Malley asked if there were any thoughts on creating a junior high school. On the treatment side these kids are in the mental health system.

Parri Black asked about funding challenges. Hope gets state funding like charter schools. Per year Hope receives about \$13-14K per student and it costs around \$20K per student. Fairbanks helps a lot. Capacity is 60 students.

### **Subcommittee Updates:**

Mindi Goodpaster spoke on behalf of the subcommittee on addiction issues and suicide prevention – Suicide prevention was assigned to infant mortality summer committee. What other subcommittees are looking at suicide prevention? (After the meeting it was determined that no other task force was charged with the priority of studying suicide issues.)

C.J. Davis spoke on behalf of the subcommittee on increasing mental health and substance abuse issues regardless of the ability to pay– Four proposals 1) joint group of higher education professionals; 2) conduct grassroots campaign in high schools to get them in the mental health profession; 3) tackle shortage of psychiatrists in Indiana (Indiana is 3<sup>rd</sup> lowest to psychologists in the US); and 4) we must find ways to allow entities that train interns to allow them to bill Medicaid for those services.

Suzanne O'Malley spoke on behalf of the subcommittee on addressing teen prescription drug abuse – The subcommittee is looking at idea of school guidance curriculum. Perhaps recommend to Commission that they create a subcommittee to look at this issue. This subject area is something the Commission would be in a better position to handle. The main focus now is still looking at Morgan County. There are two categories of kids are using drugs: 1) because of peer pressure and the allure, and 2) those that use because they have a mental health issue (those who use to escape stress). Suzanne wants to put together a survey and try and get some data on what's putting pressure on these children.

Marc Kniola spoke on behalf of the subcommittee on increasing access to mental health and substance abuse services in the Department of Correction (“DOC”). DOC and IU are completing an affiliation agreement. Things should be starting soon to get more students to intern with the DOC. These students include those obtaining their Masters in Social Work to bachelors level. Bachelor level students still need supervision. Masters students will be monitored by Corizon. They are striving for two interns at each facility. Masters students will be handling direct care, and will potentially touch every kid that Corizon sees. Bachelors students will help with general treatment programs. The hope is that this will create a pipeline of students for more hiring and retention in DOC. There needs to be an establishment of pre and posttests to gauge temperature of the program.

**Topic Proposals for Next Meeting:**

- No suggestions

**Adjourn:**

- 2:50 P.M.